

Form PV

Income Tax Payment Voucher — 2005

Massachusetts
Department of Revenue

Social Security number	Spouse's Social Security number	Due date	Amount enclosed
			Check which form you filed: <input type="checkbox"/> Form 1 Full-Year Resident <input type="checkbox"/> Form 1-NR/PY Nonresident/ Part-Year Resident <input type="checkbox"/> Name/address changed since 2004

Return this voucher with check or money order payable to: **Commonwealth of Massachusetts.**
Mail to: **Massachusetts Department of Revenue, PO Box 7003, Boston, MA 02204.**